## L20000078104

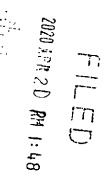
(Requ	estor's Name)	
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## **COVER LETTER**

	HOLTRY'S HOME INSTAL	LATIONS LLC.			
SUBJECT:Name of Limited Liability Company					
osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
eturn all correspo	ndence concerning this matter	to the following:			
	JERRY W HOLTRY JR				
		Name of Person			
	JERRY W, HOLTRY'S	HOME INSTALLATIONS LLC.			
		Firm/Company			
	7278 HARDING DR				
		Address			
	PENACOLA, FL. 32526				
	<del></del>	City/State and Zip Code			
	<del>-</del>				
	E-mail address: (	to be used for future annual report not	ification)		
ner information c	oncerning this matter, please co	all:			
W HOLTRY JE	₹	850 554-1556			
Name o	f Person		ne Telephone Number		
d is a check for th	ne following amount:				
.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Street Address: Registration Se	ection		
Division of Corporations		Division of Co	rporations		
			Fallahassee be Street, Suite 810		
	Division of Cor  JERRY W.  Osed Articles of sturn all corresponder information of turn all correspond is a check for the control of the contr	Name of Lim  Name of Person  Name of Person  Name of Person  Name of Status  Name of Status	Division of Corporations  JERRY W. HOLTRY'S HOME INSTALLATIONS LLC.  T: Name of Limited Liability Company  osed Articles of Amendment and fee(s) are submitted for filing.  Peturn all correspondence concerning this matter to the following:  JERRY W HOLTRY JR  Name of Person  JERRY W. HOLTRY'S HOME INSTALLATIONS LLC.  Firm/Company  7278 HARDING DR  Address  PENACOLA, FL. 32526  City/State and Zip Code  BILLYHOLTRY@GMAIL.COM  F-mail address: (to be used for future annual report not are information concerning this matter, please call:  W HOLTRY JR  Name of Person  At 850  Area Code  Daytin  J is a check for the following amount:  On Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Mailing Address:  Registration See Copy On the Copy of Control of Corporations  P.O. Box 6327		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## JERRY W HOLTRY'S HOME INSTALLATIONS LLC.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were tiled on 03/10/2020	and accioned
Florida document number L20000078104	ly were fried on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	<del> </del>	
(Principal office address MUST BE A STREET ADDRESS)	·	2020 AP F
		PD
		20
Enter new mailing address, if applicable:		700 [1]
(Mailing address MAY BE A POST OFFICE BOX)		-
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<del></del>
	Florida	
<del></del>	. Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agen	ıt:	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	te performance of my duties, and I am j s provided for in Chapter 605, F.S. Or,	familiar with and if this document is
If Ci	nanging Registered Agent, Signature of New Re	gistered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
OFFICE	AARON AUSTIN ALLEN	3541 BUCKHORN DR CRESTVIEW FL 32539	<b>=</b> Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
	<del> </del>		□Add
			□Remove
		<del></del>	□Change
			□Add
		□Remove	
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other in	information, enter change(s) here: (Attach additional sheets, if necessary.)	
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Note: If the date inserted i	than the date of filing:	)5.0207 (3)(b) sted as the
If the record specifies a delayed record is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	er the
Dated APRIL 9	2020	
	Signature of a member or authorized representative of a member	
JERRY WILLIA	IAM HOLTRY JR	
	Typed or printed name of signee	

Filing Fee: \$25.00